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PTO/SB/05 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032

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UTILITY	Attorney Docket No.	
PATENT APPLICATION	First Inventor	
TRANSMITTAL	Title	
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450	
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages] (preferred errangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description	 CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) Computer Readable Form (CRF) Specification Sequence Listing on:	
- Claim(s)	ACCOMPANYING APPLICATION PARTS	
- Abstract of the Disclosure 4.	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney English Translation Document (if applicable) 11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (If foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent. Other: CANCA LETT.	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title; or in an Application Data Sheet under 37 CFR 1.76:		
Continuation Divisional Continuation-in-part (CIP) of prior application No.:		
Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
19. CORRESPONDENCE ADDRESS		
Customer Number: OR Correspondence address below		
Name THERESA ANN PIT OCCO		
Address 303 North Lehigh Road		
City GLASSDORO	State NEW JERSEY Zip Code 08028	
Country	ephone 856 863-1620 Fax	
	Registration No. (Attorney/Agent)	
Signature 1.51 / 111	Date 3/1/4	

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If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.

MEDIWATCH COVER LETTER

NAME OF INVENTION: MEDIWATCH

NAME OF INVENTOR(S): 1. THERESA ANN PITOCCO

2. MICHELLE CHRISTINA PITOCCO

DATE OF CONCEPTION: SEPTEMBER 22, 2001

DISCLOSURE DATE: MARCH 12, 2002

DISCLOSURE DOCUMENT NO.: 507177

<u>PURPOSE:</u> WATCH THAT OPENS UP, TO BECOME A PILL CASE WITH THREE OR FOUR COMPARTMENTS TO CARRY ONE DAY'S MEDICATION(S) (PILLS). THIS WATCH SHALL HAVE THREE OR FOUR ALARMS TO CO-INSIDE WITH THE NUMBER OF COMPARTMENTS, TO BE SET AT SCHEDULED TIMES, SO THAT THE PATIENT DOES NOT MISS A PRESCRIBED DOSE OF MEDICINE.

THE INSIDE LID OF THE WATCH WILL CONTAIN A DISC ON WHICH THE PATIENT MAY LIST THE MEDICATIONS.
THE BACK OF THE WATCH WILL SERVE AS A MEDICAL ALERT BRACELET, WITH ENGRAVED MEDICAL INFORMATION REGARDING THE WEARER OF THE MEDIWATCH. MEDICAL PERSONNEL WILL BE TRAINED TO CHECK FOR THE MEDIWATCH.

SIGNATURE OF INVENTOR (1)
PRINTED NAME OF INVENTOR (1) THERESA ANN PITOCOD
SIGNATURE OF INVENTOR (2) My Chelle C Petocco
PRINTED NAME OF INVENTOR (2)
Applicants CLAIMING "SMALL Entity Status."

DATENT PATENT PAGE 10 20024

PTO/SB/17 (08-03)

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tive 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Complete if Know	vn
Application Number	
Filing Date	
First Named Inventor	
Examiner Name	
Art Unit	
Attorney Docket No.	······

(Complete (if applicable))

Telephone 856 - 863

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)		
Check Credit card Money Other None	3. ADDIT	ONAL FEES	
Deposit Account:		Small Entity	
Deposit Account	Fee Fee Code (\$)	Fee Fee Code (\$) Fee Description Fee Paid	
Number Deposit	1051 130	2051 65 Surcharge - late filing fee or oath	
Account Name	1052 50	2052 25 Surcharge - late provisional filing fee or cover sheet	
The Director is authorized to: (check all that apply)	1053 130	1053 130 Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812 2,520	1812 2,520 For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application	1804 920°	1d04 920° Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251 110	2251 55 Extension for reply within first month	
1. BASIC FILING FEE	1252 410	2252 205 Extension for reply within second month	
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	1253 930	2253 465 Extension for reply within third month	
Fee Fee Fee Fee Pee Paid Code (\$) Code (\$)	1254 1,450	2254 725 Extension for reply within fourth month	
1001 750 2001 375 Utility filing fee	1255 1,970	2255 985 Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401 320	2401 160 Notice of Appeal .	
1003 520 2003 260 Plant filing fee	1402 320	2402 160 Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403 280	2403 140 Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451 1,510	1451 1,510 Petition to institute a public use proceeding	
SUBTOTAL (1) (\$\ 385.00	1452 110	2452 55 Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,300	2453 650 Petition to revive - unintentional	
_ Fee from _	1501 1,300	2501 650 Utility issue fee (or reissue)	
Total Claims Extra Claims below Fee Paid	1502 470	2502 235 Design issue fee	
Independent Claims - 3** = X	1503 630	2503 315 Plant issue fee	
Multiple Dependent	1460 130	1460 130 Petitions to the Commissioner	
Large Entity Small Entity	1807 50	1807 50 Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee Fee Description	1806 180	1806 180 Submission of Information Disclosure Stmt	
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021 40	8021 40 Recording each patent assignment per property (times number of properties)	
1201 84 2201 42 Independent claims in excess of 3	1809 750	2809 375 Filing a submission after final rejection (37 CFR 1.129(a))	
1203 250 2203 140 Multiple dependent claim, if not paid	1810 750	2810 375 For each additional invention to be	
1204 84 2204 42 ** Reissue independent claims over original patent		examined (37 CFR 1.129(b))	
1205 18 2205 9 ** Reissue claims in excess of 20	1801 750 1802 900	2801 375 Request for Continued Examination (RCE)	
and over original patent		1802 900 Request for expedited examination of a design application	
SUBTOTAL (2) (\$)	Other fee (specify)		
or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)		

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Registration No.

(Attorney/Agent)

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	Application Number	
TRANSMITTAL	Filing Date	•
FORM	First Named Inventor	
(to be used for all correspondence after initial t	filing) Art Unit	
,	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	
	ENCLOSURES (Check all that appl	(y)
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks APPLICANT CLAIMS	After Allowance communication to Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): COUE & LETTE DISCLOSURE DETUMENT (Copy) SMALL ENITY STATUS."
under 37 CFR 1.52 or 1.53		
SIGNAT	TURE OF APPLICANT, ATTORNEY, (OP ACENT
Firm	O /	UN AGENT
or Individual name	ANN PITOCCO	·
Signature That are	2	
Date Wood	mon Pitacoo	
I MACK O	2, 2004	
CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name There	SA ANN PITOCCO	
Signature	ses from Petoco	Date 03/06/04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.